## Presented at the Armed Forces Radiobiology Research Institute Scientific Medical Effects of Ionizing Radiation Course July 28 through August 1, 2008 Bethesda, Maryland

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The Scientific Medical Effects of Ionizing Radiation Course, conducted once a year, focuses on the latest research about the medical effects of ionizing radiation to help clinicians, health physicists, and medical planners preserve troop health in the face of radiological/nuclear terrorism or warfare.

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## Medical Operations in a Contaminated Environment

Medical Effects of Ionizing Radiation Scientific Update 28 July 2008

CAPT Jeffrey W. Timby, MC, USN
Command Surgeon

## JOINT TASK FORCE CIVIL SUPPORT

To Serve and Support



## Purpose

- Provide an overview of Joint Task Force Civil Support (JTF-CS)
- Discuss the role of JTF-CS in response to a nuclear or radiological emergency
- Discuss the JTF-CS medical concept of operations
- Discuss operational risk management



#### What is JTF-CS?

- A USNORTHCOM standing Joint Task Force HQ of Joint military, DOD civilian and contractor personnel at Fort Monroe, Virginia.
- Originally established under USJFCOM (pre-9/11) to address national level concerns for planning and integration of DOD CBRNE Consequence Management (CM) support to civil authorities.
- A deployable Command and Control headquarters for DOD units and personnel executing CM operations in response to one or more CBRNE incidents.



#### **Geographical Combatant Command**





#### USNORTHCOM Mission Statement

USNORTHCOM anticipates and conducts
Homeland Defense and Civil Support operations
within the assigned area of responsibility
to defend, protect, and secure the United States and
its interests







#### US JOINT FORCE LAND COMPONENT COMMANDER Mission Statement

 US Army North (USARNORTH), as the Joint Force Land Component Command (JFLCC) and the Army Service Component Command (ASCC) to US Northern Command, conducts Homeland Defense (HD), Civil Support (CS) operations and Theater Security Cooperation (TSC) activities in order to protect the American people and our way of life.

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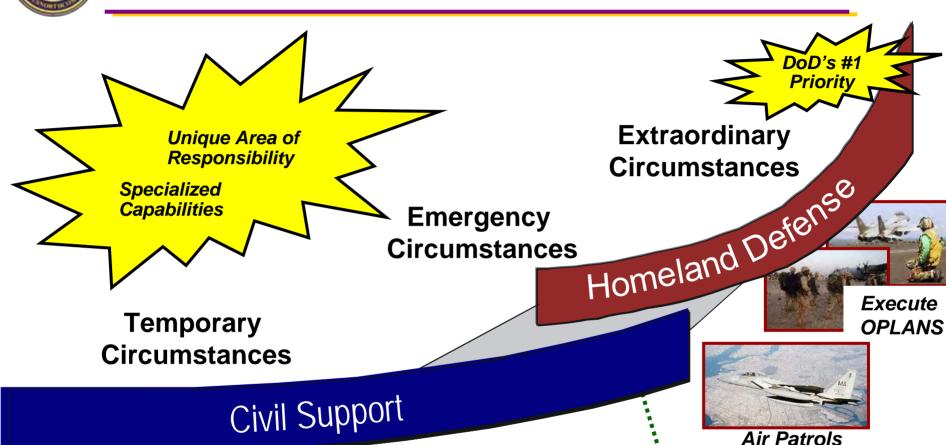
JTF-CS anticipates, plans and integrates USNORTHCOM Chemical, Biological, Radiological, Nuclear, and high-yield Explosive (CBRNE) Consequence Management operations and when directed, establishes command and control of DoD forces for a CBRNE incident to assist local authorities in saving lives, preventing injury, and providing temporary critical life support







#### **USNORTHCOM Missions**





**Events** 



Unclassified

Patrol Spt







**CBRNE** Civil Disturbance





Missile Security Defense

**Transnational Threats** 

Relief

**Incident Mgmt** 

U

D



#### **USNORTHCOM CBRNE CM**

**Tiered Response Options** 

# SCOPE OF DOD RESPONSE



#### Tier II

- JTF-CS
  - with technical augmentation
- JTF-CM (X2 if required)
  - Command and Control **Headquarters 2 HQ(-)(ARNORTH)**
  - > Joint Planning Augmentation Cell (JTF-CS)
  - Joint Manning Document augmentation required

DCO, DCE and EPLOs continue **National Response Plan role** 

#### Tier III

**USNORTHCOM Assigned 0-9** level JTF Headquarters

Complex regional problem with multiple subordinate C2 elements

- > JTF-CS
- > JTF-CM
- MACDIS or Other JTFs

#### Formed from:

- > Standing Joint Force **Headquarters- North (SJFHQ-N)**
- > ARNORTH (with joint augmentation from SJFHQ-N)
- Force Provider resources

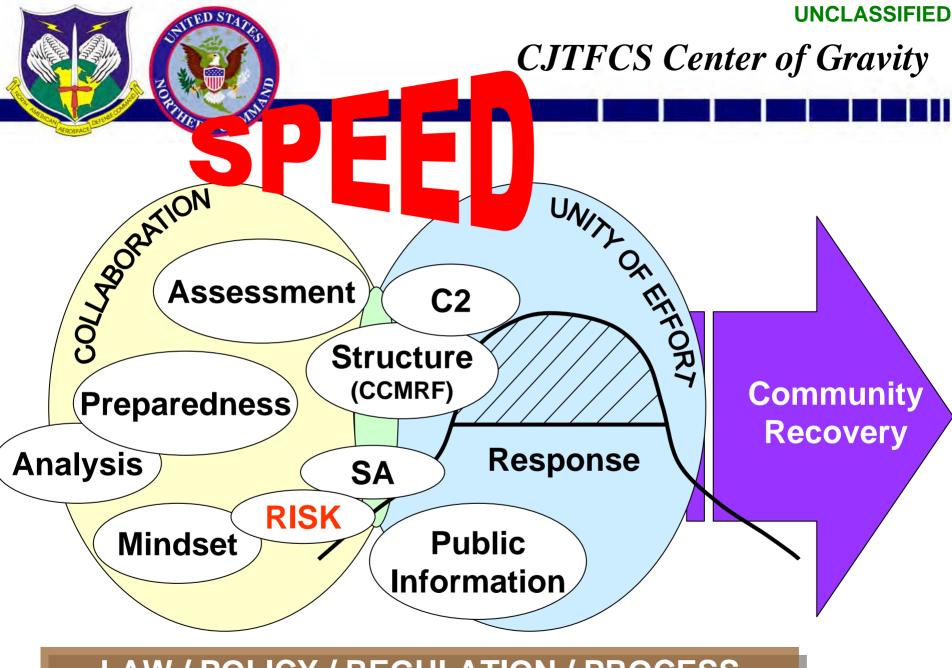
DCO, DCE and EPLOs continue National Response Plan role



#### Tier I

**Defense Coordinating Officer** or other O-6 Commander

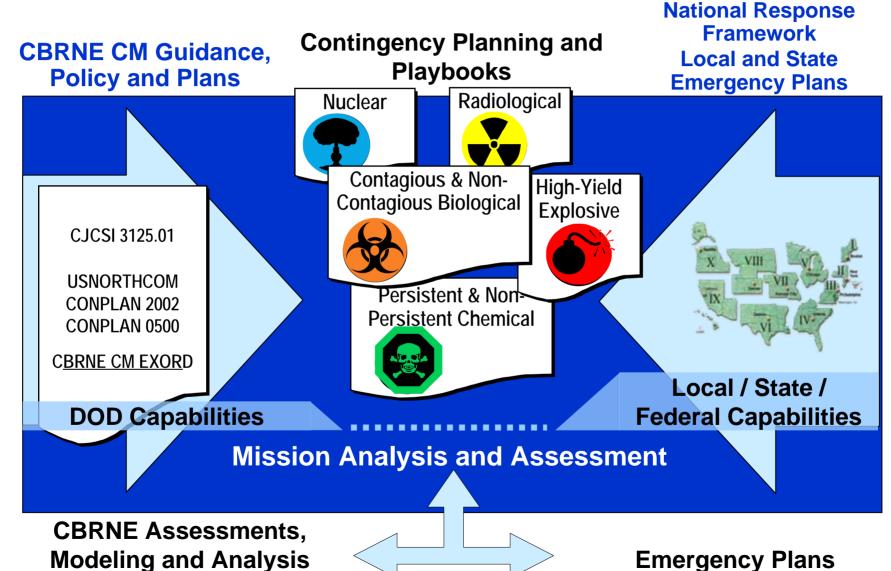
- DCO with DCE and EPLOs in National Response Plan role
- JPAC from JTF-CS



LAW / POLICY / REGULATION / PROCESS

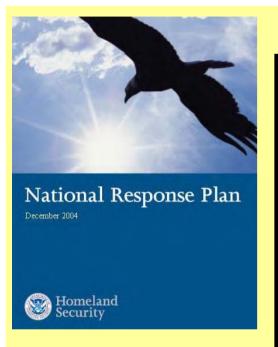


## **Deliberate Planning**





## **Capability Requirements Analysis**



- NRP identifies DOD support functions.
- Mission analysis determines specified and implied tasks.

#### 15 PLANNING SCENARIOS

Created for Use in National, Federal, State, and Local Homeland Security Preparedness Activities

The Homeland Security Council February 2006

#### **CBRNE CM Scenarios**

- 1: Nuclear Detonation 10-Kiloton Improvised **Nuclear Device**
- 2: Biological Attack Aerosol Anthrax
- 3: Biological Disease Outbreak Pandemic
- 4: Biological Attack Plague
- 5: Chemical Attack Blister Agent
- 6: Chemical Attack Toxic Industrial Chemicals
- 7: Chemical Attack Nerve Agent
- 8: Chemical Attack Chlorine Tank Explosion
- 11: Radiological Attack Radiological Dispersal Devices

Scenarios highlight the scope, range, and complexity of catastrophic incidents

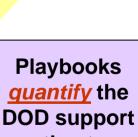
#### **Tasks**

The Universal Task List (UTL) is a menu of tasks that may be performed in major events such as those detailed in the **National Planning** Scenarios.

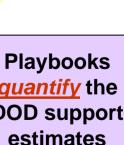
#### **Capabilities**

**The Target Capabilities** List (TCL) describes specific capabilities (and levels of capability) that federal. State. local. and tribal entities are expected to develop and maintain.

**UTL** and TCL link tasks to capability requirements



PLAYBOOKS

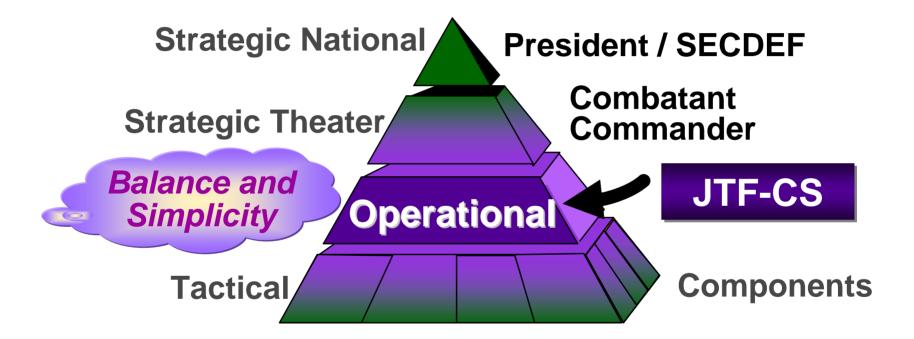


#### Playbooks are scenario-based

**Bridge** the NRP specified and implied support tasks to DOD capabilities Analyze CBRNE CM resource requirements based on anticipated tasks



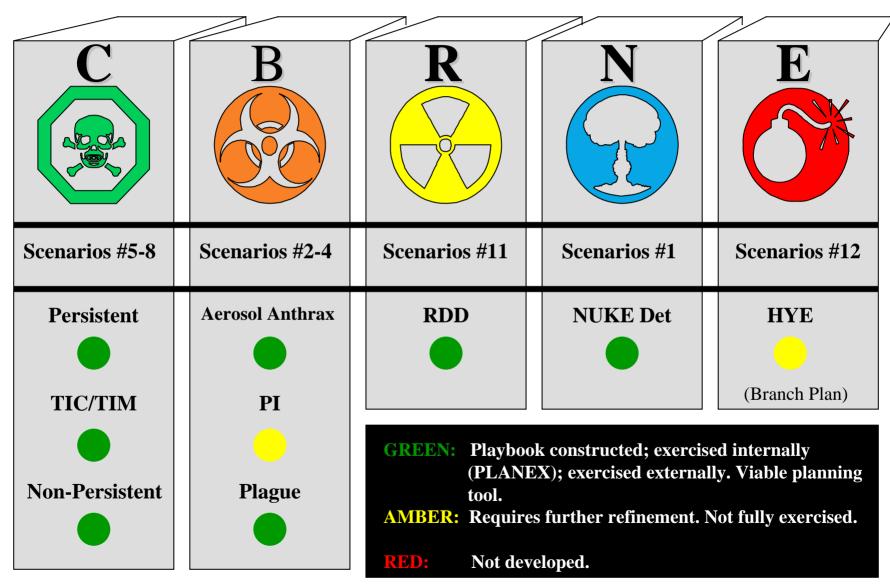
## Focus of CBRNE Playbooks



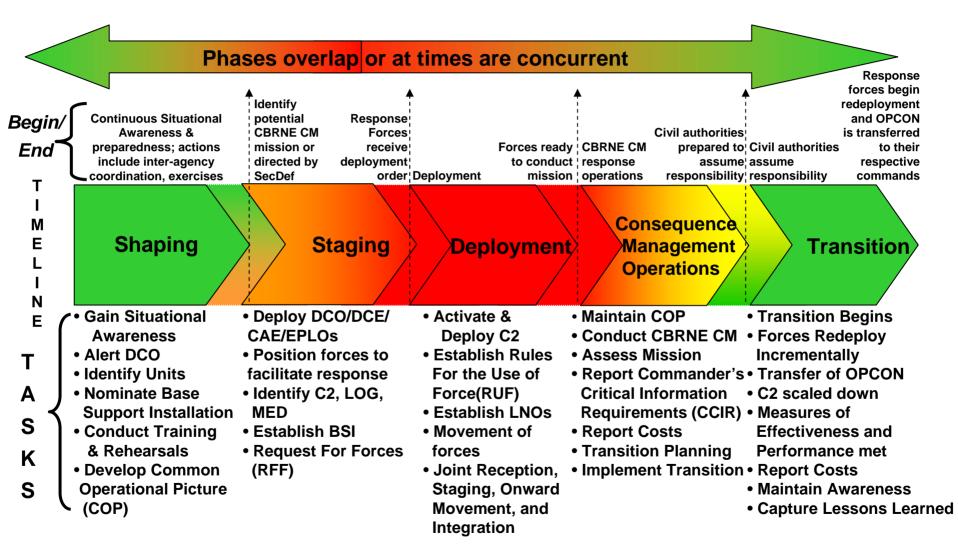
Setting the conditions for subordinate success.



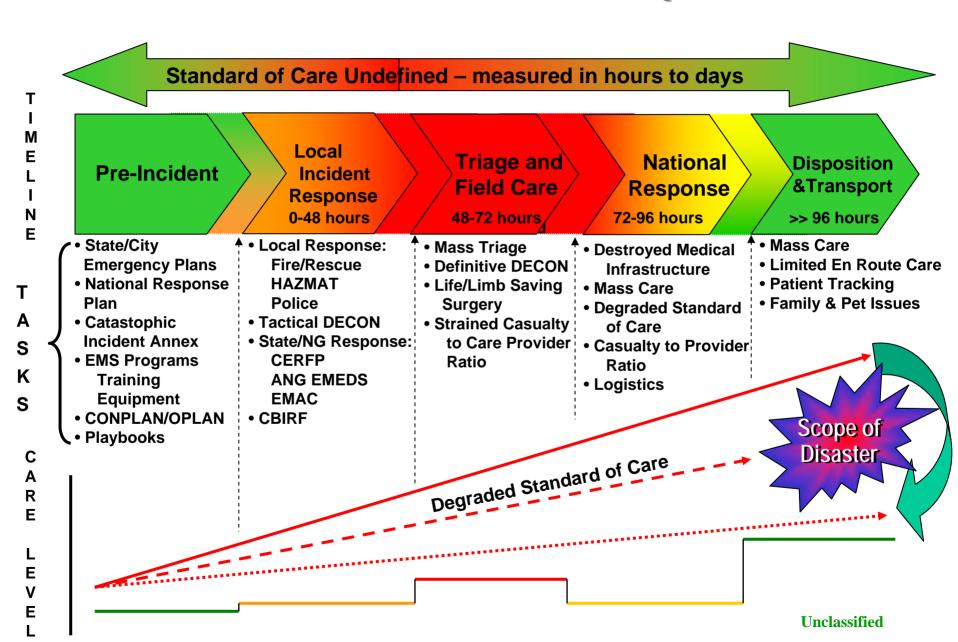
## **Playbook Status**



## Operational Phases



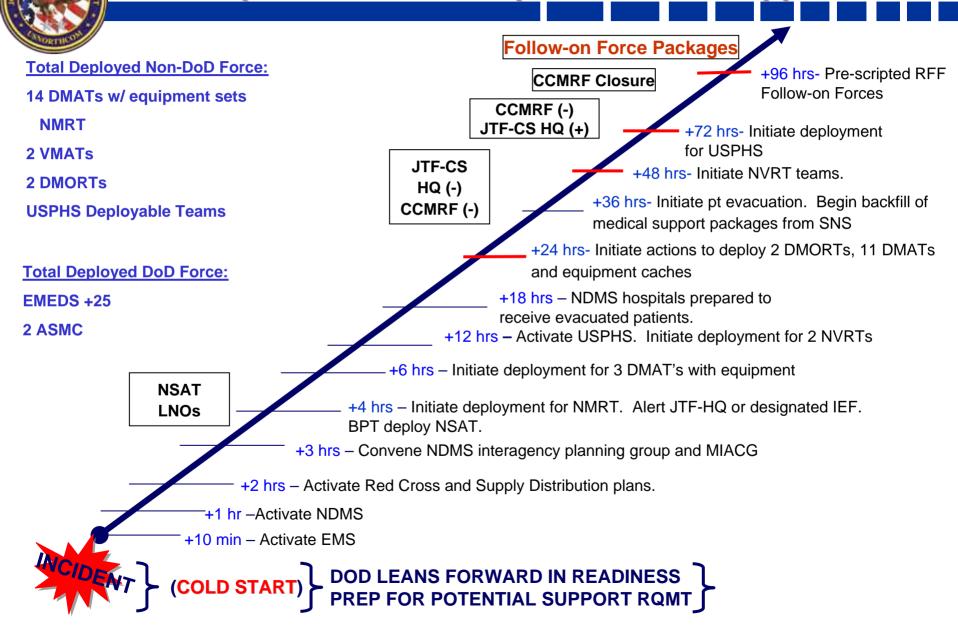
## Disaster Response Phases

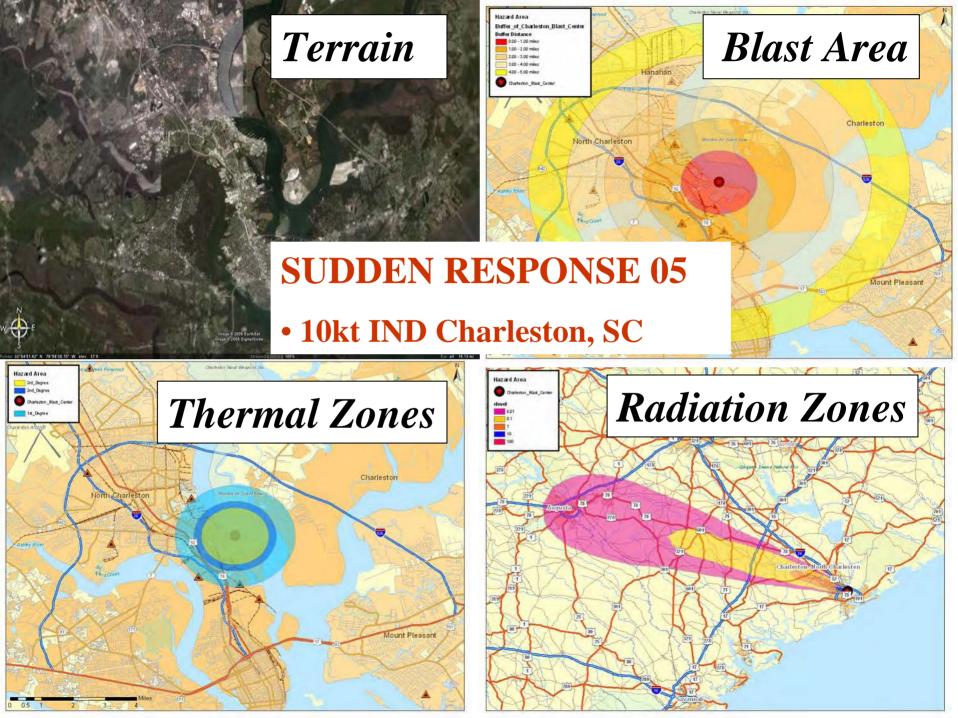


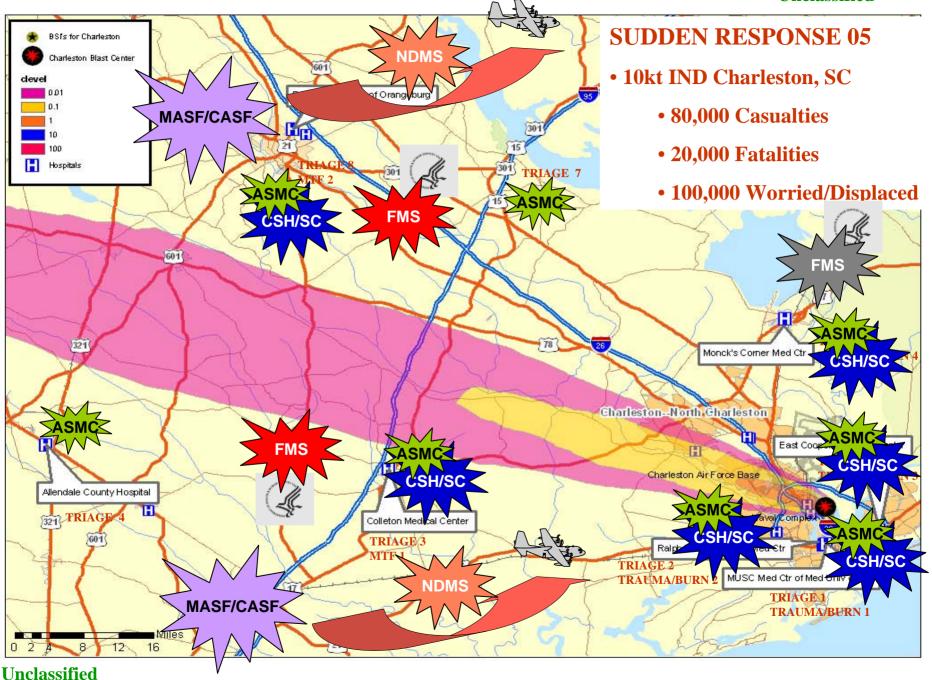
#### **UNCLASSIFIED**

## **HSS Response Timelines**

#### Based upon NRP Catastrophic Incident Supplement



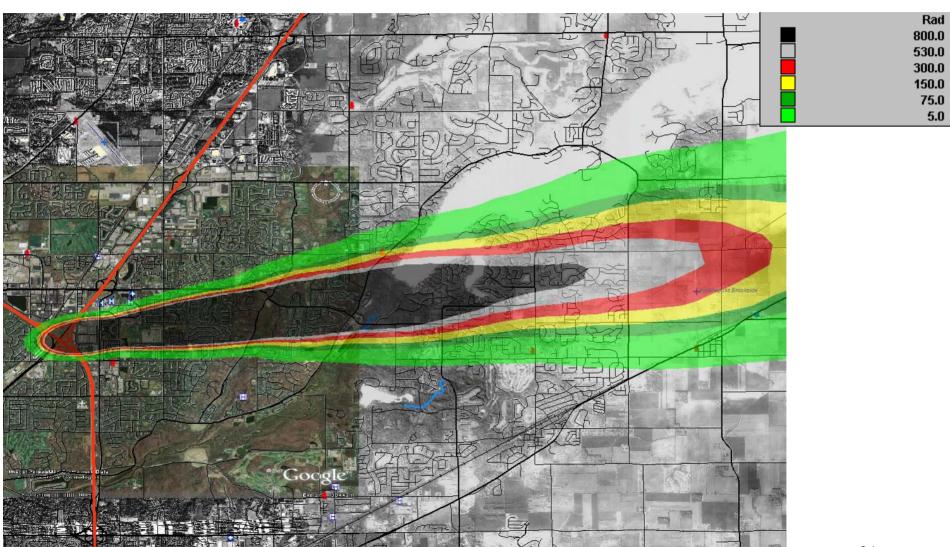




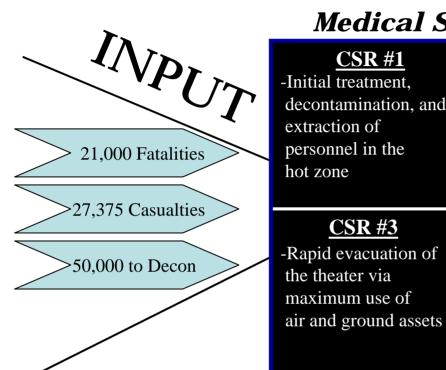
## Combined Prompt Effects



#### Integrated Dose 12, 24, 36, 48 hrs, 3, 4, 5 days



#### **HOW DO WE ACHIEVE SUCCESS?**



Medical Support Box

decontamination, and

#### **CSR #2**

- -Medical assets postured to treat and sustain life until evac can occur
- -Mortuary operations established

#### **CSR #4**

-Medical response community integrated, assets coordinated for maximum efficiency



**LIVES SAVED** 

Suffer ing mitigated

**DECEASED RESPECTED** 

#### **STATUS**

#### THE "BIG 6"

Collection/TX/Decon system established to support hot zone TX facilities established for continuing care and stabilization Civilian hospitals evacuated, focused on treating critically ill Evacuation staging areas operational Airhead operating at maximum output Maximum evacuation occurring via ground routes



#### **Casualty Management – CPG**

CCMRF CDR Conference Aug 2007

Joint Theatre Trauma System (JTTS)

#### **Clinical Practice Guidelines (CPG):**

- ✓ Damage Control Resuscitation
- ✓ Use of Recombinant Factor VIIa (rFVIIa)
- ✓ Blunt Abdominal Trauma
- ✓ Urologic Trauma
- ✓ Deep Venous Thrombosis
- ✓ EMT Thoracotomy
- √Trauma Airway Management

- ✓ Irrigation of War Wounds
- √ Hypothermia
- √ Vascular Injury
- ✓ Pelvic Fracture
- ✓ Burn
- ✓ Transport Transfer

Guideline Only – not a substitute for clinical judgment and subject to overriding operational considerations

✓ Traumatic Brain Injury (TBI) and Military Acute Concussion Evaluation (MACE)





#### **JTF-CS Operational Risk Assessment**

## **Medium**

Minimal Risk Assessment Low

≤10 cGy Risk Assessment Low

≤25 cGy Risk Assessment Medium



### Risk Assessment

Ops	Hazard	Risk	Control	Risk
Minimal		M	DENT	L
<10 cGy	DENTIFIED	Е	MPLEN & TIFIED	L
<25 cGy	(E)	E	ENTED	M



#### **Acute and Latent Medical Effects**

Dose (rads)	Acute Death (no treatment)	Acute Death (w/treatment)	Acute Symptoms (within 4 hours)	Excess Lifetime Cancer Risk
1	0 %	0 %	0 %	0.08 %
10	0 %	0 %	0 %	0.8 %
50	0 %	0 %	0 %	4 %
100	<5 %	0 %	5 - 30 %	8 %
150	<5 %	<5%	40 %	12 %
200	5 %	<5%	60 %	16 %
300	30 - 50 %	15 - 30 %	75 %	24 %
600	95 -100 %	50 %	100 %	>40 %
1000	100 %	>90 %	100 %	>50 %



## Revision First Draft JP 3-11 (Aug 07)

## **JTF-CS Operational Risk Assessment**

## High?

Mission Importance  Acceptable Risk level	Critical	Priority	Routine
Extremely High	125	75	25
High	75	25	5
Moderate	25	5	0.5
Low	5	0.5	0.1



#### Proposed Revision to First Draft JP 3-11

## **JTF-CS Operational Risk Assessment**

#### Medium

Personal Radiological Monitoring Program					
Cumulative dose RES Category Risk Levels					
0 to 0.05 cGy	0	No Risk			
0.05 to 0.5 cGy	1A	Normal			
0.5 TO 5 cGy	1B	Minimal			
5 to 10 cGy	1C	Limited			
10 to 25 cGy	1D	Increased			
25 to 75 cGy	1E	Significant			
75 or more cGy	2	N/A			

Mission Importance  Acceptable Risk level	Critical	Priority	Routine
Extremely High	125	75	25
High	75	25	10
Moderate	25	10	5
Low	10	5	0.5



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## **JTF-CS Operational Risk Assessment**

#### **Medium**

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10 to 25 cGy	1D	Increased			
25 to 75 cGy	1E	Significant			
75 or more cGy	2	N/A			

ſ	Mission Importance  Acceptable Risk level	Critical	Priority	Routine
	Extremely High	2	1E	1D
t	High	1E	1D	1C
	Moderate	1D	1C	1B
	Low	1C	1B	1A



#### The Day After

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#### The Day After

Action in the 24 Hours Following a Nuclear Blast in an American City

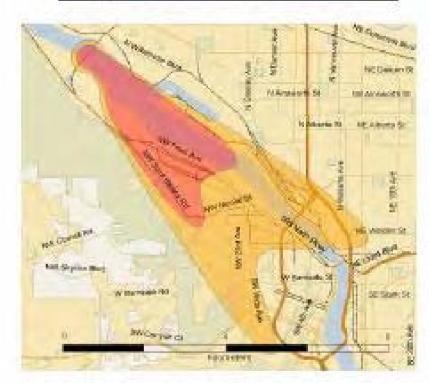
Ashton B. Carter, Michael M. May, and William J. Perry

> A Report Based on a Workshop Hosted by

The Preventive Defense Project

Harvard and Stanford Universities
Ashton B. Carter and William J. Perry, Co-Directors

#### Alternative Plume Shape: Ten-kiloton groundburst



This butterfly pattern, eather than an ovoid pattern, would arise from wind shear (different wind speed and direction at different altitudes).

Source: Lawrence Livermore National Laboratory



#### The Day After

- > PREVENTION VERSUS RESPONSE
  - ✓ Prevention remains by far the best protection against nuclear terrorism
- > FEDERAL GOVERNMENT PLANNING
  - ✓ The federal government should stop pretending that state and local officials will be able to control the situation on the Day After
- > SHORT-TERM SHELTERING VERSUS PROMPT EVACUATION.
  - √ Fallout shelters deserve a comeback
- > LONG-TERM RADIATION EXPOSURE
  - ✓ A sensible approach to response, recovery, rebuilding, and decontamination after a nuclear detonation will require emergency responders and some citizens in the affected area to accept a greater exposure to radiation than is permitted by normal day-today occupational guidelines.



#### The Day After

- > FOLLOW-ON ATTACK
  - ✓ If one nuclear weapon goes off, there are likely to be more to follow: the response plan for the Day After should assume followon attacks
- > RETALIATION AND DETERRENCE
  - ✓ The source of the weapon or material detonated by a nongovernmental terrorist group will eventually be traced back to a government – Russia, Pakistan, another foreign source, or even the United States
- > CONTINUITY OF THE AMERICAN FORM OF GOVERNMENT.

